UTILITY PATENT APPLICATION TRANSMITTAL

248508US6X Attorney Docket No. First Inventor or Application Identifier

Osamu KOZAKAI, et al.

Title A PORTABLE WIRELESS APPARATUS

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patient application contents ADDRESS TO: Mail Stop Patient Application Alexandrie, Virginia 221313 The Fee Transmittal Form (e.g. PTO/SE/17) Submit an original and a duplicate for fee processing) Total Sheets 13 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Sheets 9 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 13 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 9 Total Sheets 13 ACCOMPANYING APPLICATION PARTS 15 Drawing(s) (35 U.S.C. 113) Total Sheets 13 Total Sheets 13 ACCOMPANYING APPLICATION Drawing 15 Drawing(s) (35 U.S.C. 113) Total Sheets 13 Total Sheets 13 ACCOMPANYING APPLICATION Drawing 15 Description Total Pages 15 Drawing(s) (35 U.S.C. 113) Total Sheets 13 Total Sheets 13 ACCOMPANYING APPLICATION Drawing 15 Description Translation Decisions 15 Description Translation De	Contribution nonprovisional applications under or or it is a contribution of the individual of the ind	
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9. 37 C.F.R. §3.73(b) Statement Power of Attorney 3. Drawing(s) (35 U.S.C. 113) Total Sheets 9 4. Oath or Declaration Total Pages 10. English Translation Document (if applicable) 5. Newly executed (original or copy) 6. Copy from a prior application (37 C.F.R. §1.63(d)) 7. DELETION OF INVENTOR(S) Signed statement attached eleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)/2 and 1.33(b). 5. CD-ROM or CD-R in duplicate, large table or Computer Porgram (Appendix) 7. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: Continuation Divisional Continuation-in-part (CIP) Of prior application no: Continuation Divisional Continuation-in-part (CIP) Of prior application no: Request for Priority Prior application information: Continuation Divisional Continuation-in-part (CIP) Of prior application information: Examiner: Continuation Divisional application and is hereby incorporated by reference. The prior application information: Examiner: Group Art Unit: Cortinuation Divisional Continuation-in-part (CIP) Of prior application information: Cortinuation Divisional application and is hereby incorporated by reference. Cortinuation Divisional application parts. Cortinuation Divisional application information: Cortinuation Divisional application information: Cortinuation Divisiona	2. Specification Total Sheets 13	
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Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and 1.33(b). 5. CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification or Sequence Listing on: ii. CD-ROM or CD-R (2 copies); or iii. Paper c. Statements verifying identity of above copies 7. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: Continuation Divisional Continuation-in-part (CIP) of prior application no.: Prior application information: Examiner: Group Art Unit: For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application parts. 18. CORRESPONDENCE ADDRESS Customer Number 22850 (703) 413-3000 FACSIMILE: (703) 413-2220 Name: Bradley(DLytle Registration No.: 40,073 Signature: Date: 2/6/64	b. Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)	
1.33(b) CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)	Signed statement attached deleting inventor(s) named in	15. Applicant claims small entity status.
5. Program (Appendix) 6. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. Computer Readable Form (CRF) b. Specification or Sequence Listing on: i. CD-ROM or CD-R (2 copies); or ii. Paper c. Statements verifying identity of above copies 7. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below: Continuation Divisional Continuation-in-part (CIP) of prior application no.: Prior application information: Examiner: Group Art Unit: For CONTINUITION OR DIVISIONAL APPS only. The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts. 18. CORRESPONDENCE ADDRESS Customer Number 22850 (703) 413-3000 FACSIMILE: (703) 413-2220 Name: Bradley(DLytle Registration No.: 40,073 Signature: Date:		
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, waited or remittee .	Name: James D. Hamilton	Registration No.:

Registration No. 28,421

Docket No.

248508US6X

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

INVENTOR(S) Osamu KOZAKAI, et al.

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

A PORTABLE WIRELESS APPARATUS

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE	CALCULATIONS
TOTAL CLAIMS	5 - 20 =	0	x \$18 =	\$0.00
INDEPENDENT CLAIMS	2 - 3 =	0	x \$86 =	\$0.00
☐ MULTIPLE DEPENDEN	T CLAIMS (If appl	icable)	+ \$290 =	\$0.00
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			BASIC FEE	\$770.00
	TOTAL OF	ABOVE CAL	CULATIONS	\$900.00
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- ☐ A check in the amount of \$0.00 to cover the filing fee is enclosed.
- Credit card payment form is attached to cover the filing fee in the amount of \$900.00
- The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.

Respectfully Submitted,

OBLON, SPIVAK, McCLELLAND, MAIER & NEUSTADT, P.C.

2/6/04

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